

## Affidavit of Support Form

**A FORM I-20 CANNOT BE ISSUED TO YOU UNTIL WE HAVE RECEIVED ALL DOCUMENTS RELATED TO YOUR FINANCIAL ABILITY.**

You are required to certify that you will have available the sum of \$15,000.00 (minimum)\* for your own expenses for each academic year at Nicholls State University, exclusive of travel expenses. A late registration fee is charged to the student who fails to report during the regularly scheduled registration period. Students who plan to stay in the United States through one summer will need at least an additional \$3,500.00 for that three-month period. If you are married and plan to bring your spouse and/or children, a proportionately larger amount must be certified, on the basis of at least an additional \$6,000.00 per academic year, depending on size of family.

\*Fees are subject to change

### **OFFICIAL CERTIFICATION OF SOURCES OF FUNDS AND AMOUNTS**

1. I, \_\_\_\_\_, CERTIFY THAT THE TOTAL AMOUNT OF MONEY I HAVE AVAILABLE FOR MY FIRST ACADEMIC YEAR OF STUDY AT NICHOLLS STATE UNIVERSITY (INCLUDING FUNDS FOR SPOUSE AND CHILDREN, IF APPLICABLE) IS U.S. \$ \_\_\_\_\_. FURTHER, I CERTIFY THAT THE ABOVE INFORMATION PROVIDED IS CORRECT AND COMPLETE AND I SHALL NOTIFY NICHOLLS STATE UNIVERSITY OF ANY CHANGE IN MY FINANCIAL CIRCUMSTANCES.

Student's signature \_\_\_\_\_ Date \_\_\_\_\_

2. This is to certify that I have read the information furnished by the applicant on this form, that it is true and accurate, and that the funds are available and will be provided as specified.

Sponsor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Sponsor's Name (Printed) \_\_\_\_\_ Date \_\_\_\_\_

Relationship of Sponsor to Applicant \_\_\_\_\_

**NOTE: THE FOLLOWING STATEMENT MUST BE COPIED AND COMPLETED BY YOUR (OR YOUR SPONSOR'S) BANK OR FINANCIAL INSTITUTION ON ITS LETTERHEAD STATIONARY.**

3. This is to certify that I have read the information given by the applicant on the Affidavit of Support Form, that it is true and accurate, and that the applicant's sponsor has sufficient funds to cover the student's expenses while she/he is in the United States.

Bank Official's Signature \_\_\_\_\_

Bank Official's Name (Printed) \_\_\_\_\_ Title \_\_\_\_\_

Name of Bank \_\_\_\_\_